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				aug 5	29	.3007	(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTO	ATTORNEY DOCKET NO.		RNEY DOCKET NO.	CONFIRMATION NO.
10/750,291	12/31/2003		Nicholas P.R. Hill	59377US002		59377US002	9190
TITLE OF INVENTION	: TOUCH SENSING W	ith fouch down an	ID LIFT OFF SENSITIV	ITY			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	09/06/2007
EXAMINER ART UNIT			CLASS-SUBCLASS	1			
SHAPIRO, LEONID 2629		2629	345-173000	-			
"Fee Address" ind	ondence address (or Che B/122) attached. fication (or "Fee Address 22 or more recent) attack	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 registered patent attorneys or a gents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DAT.	A TO BE PRINTED ON	THE PATENT (print or t	(pc)			
PLEASE NOTE: Un	less an assignee is ident	ified below, no assignce	data will appear on the	patent. If an assign	ce is ic	tentified below, the de	cument has been filed for
(A) NAME OF ASSI		piction of this form is NO	(B) RESIDENCE: (CIT				
3M Inno	synthye F	roperties	Compan	4, 51-1		ul, Min	nesotra
Please check the appropr	iate assignee category or	categories (will not be p	rinted on the patent):	Individual D.C.	orporati	ion or other private gro	up entity Government
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Alessue Fee	A check is enclosed						
Advance Order -	o small entity discount	permitted)	Payment by credit con The Director is herel overpayment, to Dep	ard. Form PTO-2038 by authorized to char sosit Account Number	is atta	iched. required (cc(s), any de 22.25 (enclose ar	ficiency, or credit any n extra copy of this form).
5. Change in Entity Sta	tus (from status indicate is SMALL ENTITY stat		☐ b. Applicant is no lo				
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Authorized Signature	Frobert	Dul		Date <u>29</u>	h	hy. 2007	7
Typed or printed nam	· Kober	CI. Pe	choop	Registration N	60. ⊆	5,002	-
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